

of probably 140 hours' close watching and faithful fighting against the odds of death.

In closing let me beg you who may be planning to come to this beautiful "city of the angels" to come determined to do as you would be done by. If hospital training is worth anything it is worth our while to keep its dignity intact, and you cannot do it by cheapening its remuneration. When you meet deserving cases *give* your services for Christ's sake, but when you demand your fee let it be a legitimate and uniform one so that the nurses of the west may know that the nurses of the east are a united people.

A. C. TRUSS, R.N.,
Los Angeles.

DEAR EDITOR: In reference to the letter of M. B. B. in the April number, I would like to state that just such difficulties have come to me in my few years of private nursing. I am sorry to say I have met some graduate nurses who seem unqualified to be called by that term.

One case that I was interested in was a chronic one; the nurse had to take to her bed for a time on account of illness. The nurse who took her place was unable to catheterize the patient (which at all times was very difficult), therefore the b.i.d. order for bladder irrigation was omitted. Instead of giving morphia, $\frac{1}{4}$ gr., only when absolutely necessary, as were the orders, it was given nearly every other day, and only charted as being given twice a week. She reported such progress as "sleeping well," "clear urine," "good appetite," to the doctor, so that he had innocently discontinued many treatments and remedies that would have rectified these things had he known the truth. The first nurse, on returning to her case, found the urine so thick that it would not go through the catheter, with it a very offensive odor. The patient was in a stupefied condition, and when awake constantly called for "hypo." It took over a month for this nurse to undo her careless, heartless predecessor's work. Does it not seem as though such a nurse should be punished?

Then as to the nurse following the orders of the doctor. During a typhoid case the doctor ordered solid food for the patient, but every time this was given he vomited, and when broths, etc., were given rested quietly. When the patient developed convulsions, the doctor told the family they were due to something the nurse had given that he had not ordered. The family believed the doctor and wanted to change nurses, but friends advised them not to, so the nurse stayed, much against her wishes, and never told the family the truth about the case. After the patient died, the doctor wrote and begged the nurse not to mention

these facts and said he had to keep the family practice some way, and as they blamed him for the "bad" turn in the case, he thought the best way out of it was to lay it to her, as he knew she would not *dare* to defend herself.

What is a nurse to do in a case like this?

E. B. U., R.N.

DEAR EDITOR: In reply to L. B. M.'s letter in the June JOURNAL let me say that if she will attend a meeting of the Associated Alumnae she will be happily surprised to find many private duty nurses among the delegates. Perhaps her own association has the bad habit of sending only hospital workers. It is hard for a private duty nurse to attend meetings and help in organization work, I know, for I am a private duty nurse, but there are in many places fine workers from our ranks and their hospital sisters are only too glad to share with them both the work and its rewards, such as attendance at a convention. W.

DEAR EDITOR: In "Practical Suggestions" S. M. M. tells how lifting can be made easy. Such a suggestion can be of practical value only to those familiar with the "fall-out position."

If that position were illustrated or described the original intent of the suggestion would be serviceable to those unacquainted with the key to the situation.

AN IGNORANT ONE

DEAR EDITOR: In the May JOURNAL C. H. J. asks where nurses are needed. Mason City, Iowa, has never been over-supplied, and now that two of our nurses have left we are wondering how we can supply the demand.

L. M. A.

(The name and address of the above writer will be given to any one wishing to make further inquiries.—Ed.)